PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

SPRMG-01001US

(Column 1) (Column 2)								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Colonii I)		(Column 2)		,	TYPE [OR		ENTITY	
			(0.)		ļ ·			RATE	FEE	4	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			65 minus 20=		· 41			X\$ 9=	<u> </u>	OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		2	Ψ		X43=		OR	X86=		
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* 1	the difference	e in column 1 is	less than zero, enter "0" in colum			column 2	ı	TOTAL	<u> </u>	OR	TOTAL	362	
	C	LAIMS AS A	MENDE	ENDED - PART II						3	OTHER THAN		
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* ENTATION OF MI	Minus	***	CLAIM	=		X43=		OR	X86=		
	1 23	44. <u>Š</u>	, ,	CΨ	CLAIN			+145=		OR	+290=		
	1 05	44.5	,	· ·	.0.		· L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	n 2)	(Column 3)	•						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USĻY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .		=		X\$ 9=	·	OR	X\$18=		
4ME	Independent	*	Minus	***		=		X43=	··,	OR	X86= ·		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		┟						
								+145=		OR	+290=	•	
								TOTAL DDIT. FEE	•	OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)				•	• . •		
MEN		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	1	Minus	***		-	卜	X43=		OR	X86=	-	
لــَــ	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (CLAIM			+145=		<u>ا</u> ا			
• If	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 									OR	+290=		
****	the "Highest Nun the "Highest Nur	nber Previously Pai nber Previously Pai ber Previously Paid	d For IN THIS d For IN THIS	SPACE is I	less than less than	20, enter "20," 3. enter "3."		TOTAL DIT. FEE		•	TOTAL DOTT. FEE L		